

AARTI STEELS LIMITED

An ISO 9001, 14001 & OHSAS 1800
Certified Company

Office: Plot No. 18/1B, Sector-10, CDA
Cuttack - 753 014, (Orissa) **India**
Phone : +91-671-3061000, 2309285,
Fax : +91-671-3061150, 2309407
E-mail : cuttack@aartisteelsltd.com ;
aarti@aartisteelsltd.com

Ref:ASL/Env./OSPCB/BMWR/70947

Date: 20.05.2019

The Regional Officer,
Regional Office, State Pollution Control Board,
586, Suryavihar, Link Road, Cuttack-753012
Odisha, Fax-0671-2335478.

Sub: **Statutory Compliance report under provisions of Biomedical Waste (Management & Handling) Rules, 2016 by M/s Aarti Steels Limited, Ghantikhal, Cuttack -reg.**

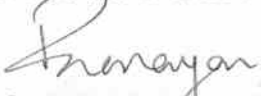
Ref:Your one time Biomedical Waste Authorisation letter no. 2284/BM-647 dated 20.11.2017.

Dear Sir,

With reference to the above, we are submitting herewith the annual return regarding Management & Handling of Biomedical Waste for the period from 1st April, 2018 to 31st March, 2019 by M/s Aarti Steels Limited, Ghantikhal, Cuttack in the prescribed format (Form-IV) for your kind perusal please.

Thanking you.

For Aarti Steels Limited,


(LTP Narayan)
President

Encl: As above

Works : Ghantikhal, P.O.: Mahakalabasta, Via: Athagarh, Dist.: **Cuttack**-754 029 (Orissa), **India. Phone:** +91-671-3061000, **Fax:** +91-671-3061148, 3061149, 3061150
Regd. Office/H.O. : G.T.Road, Miller Ganj, **Ludhiana**-141 003 (Punjab), **India, Phone:** +91-161-3006100, **Fax:** +91-161-3006155, **E-mail:** info@aartisteelsltd.com

Form - IV
(See rule 13)
ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Sudhakar Singh

	(ii) Name of HCF or CBMWTF	:	Disp. of M/S - Aarti Steels
	(iii) Address for Correspondence	:	Ghantekhal, PO:- Mahakala -
	(iv) Address of Facility	:	Bas, Dist:- Cuttack.
	(v) Tel. No, Fax. No	:	0671 - 3061150.
	(vi) E-mail ID	:	Pratish.dash@aaristeeels Ltd.
	(vii) URL of Website	:	Com. w/w. aarti steels Ltd. com.
	(viii) GPS coordinates of HCF or CBMWTF	:	Lat - 20° 30', 30" - 20° 31' 15" N Long - 85° 44' 15" - 85° 44' 45" E
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 2284/BM-647/20-11-2017valid up to 01-11-2019
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: NA, CTO valid - 31.3.20 for Aarti Integrates steel plant
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:..... NIL
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	ONE DISPENSARY
	(iii) License number and its date of expiry	:	
3.	Details of CBMWTF	:	
	(i) Number healthcare facilities covered by CBMWTF	:	
	(ii) No of beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day
4.	Quantity of waste generated or disposed in Kg per annum.(on monthly average basis)	:	Yellow Category : 6.945 kg. Red Category : 3.910 kg. White: 2.730 kg. Blue Category : 2.270 kg. General Solid waste: 27.060 kg.
5	Details of the Storage, treatment, transportation, processing and Disposal Facility		
	(i) Details of the on-site storage facility	:	Size : (i) 3m x 3m x 3m → Concrete pit. (ii) 1m x 1m x 1.5m → Concrete pit. Capacity : (i) 27 m ³ concrete pit. (ii) 1.5 m ³ concrete pit. Provision of on-site storage : (cold storage or any other provision) Deep Burial method.

disposal facilities		<p>Type of treatment equipment</p> <p>No of units</p> <p>Capacity Kg/day</p> <p>Quantity treated or disposed in kg per annum</p> <p>Incinerators</p> <p>Plasma Pyrolysis</p> <p>✓ Autoclaves <i>Two numbers (240 x 15" x 12")</i></p> <p>Microwave</p> <p>Hydroclave</p> <p>Shredder</p> <p>✓ Needle tip cutter or destroyer <i>one</i></p> <p>Sharps encapsulation or concrete pit <i>3m x 3m x 3m, 1m x 1m x 1.5m</i></p> <p>✓ Deep burial pits: <i>Two Nos.</i></p> <p>✓ Chemical disinfection: <i>one set</i></p> <p>Any other treatment equipment:</p>												
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.) <i>NA</i>												
(iv) No of vehicles used for collection and transportation of biomedical waste	:	<i>- No -</i>												
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		<table border="1"> <thead> <tr> <th data-bbox="803 1321 1015 1400"><i>NA</i></th> <th data-bbox="1015 1321 1209 1400">Quantity generated</th> <th data-bbox="1209 1321 1430 1400">Where disposed</th> </tr> </thead> <tbody> <tr> <td data-bbox="803 1400 1015 1444">Incineration</td> <td></td> <td></td> </tr> <tr> <td data-bbox="803 1444 1015 1489">Ash</td> <td></td> <td></td> </tr> <tr> <td data-bbox="803 1489 1015 1512">ETP Sludge</td> <td></td> <td></td> </tr> </tbody> </table>	<i>NA</i>	Quantity generated	Where disposed	Incineration			Ash			ETP Sludge		
<i>NA</i>	Quantity generated	Where disposed												
Incineration														
Ash														
ETP Sludge														
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	<i>NA</i>												
(vii) List of member HCF not handed over bio-medical waste.		<i>NA</i>												
6 Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		<i>- No -</i>												
7 Details trainings conducted on BMW														
(i) Number of trainings conducted on BMW Management.		<i>TWO</i>												

	(ii) number of personnel trained		9 persons.
	(iii) number of personnel trained at the time of induction		
	(iv) number of personnel not undergone any training so far		
	(v) whether standard manual for training is available?		As per guide line.
	(vi) any other information)		
8	Details of the accident occurred during the year		NIL
	(i) Number of Accidents occurred		
	(ii) Number of the persons affected		
	(iii) Remedial Action taken (Please attach details if any)		
	(iv) Any Fatality occurred, details.		
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		Not applicable
	Details of Continuous online emission monitoring systems installed		NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NIL
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Auto cleaning as per the standard is normal.
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator) NIL

Certified that the above report is for the period from

DT=01=04=2018 to DT=31=03=2019

Name and Signature of the Head of the Institution

Date: 20.5.19

Place: Ghaatikhal
Cuttack